

Department of Medical Assistance Services 600 East Broad Street, Suite 1300 Richmond, Virginia 23219

www.dmas.virginia.gov

MEDICAID MEMO

TO: All Day Support Providers

FROM: Cynthia B. Jones, Acting Director MEMO: Special

Department of Medical Assistance Services DATE: July 23, 2010

SUBJECT: Day Support Services Billing Changes – September 1, 2010

The purpose of this memorandum is to notify day support providers of changes in the methodology for recording and billing units for day support in the Day Support, Intellectual Disabilities, and the Individual and Family Developmental Disabilities Support Waiver.

Effective with billing dates of service on or after September 1, 2010, the units billed for day support services - both regular and high intensity; pre-vocational services - both regular and high intensity; and supported employment - enclave only in the affected waivers specified above will change. Units will now be referred to as 'blocks'.

Unit	Current	Block	New
1	1 to 3.99 hours of	1	\geq 1 hour to \leq 3 hours and 59 minutes of service a day
	service a day		
2	4 to 6.99 hours of	2	\geq 4 hours to \leq 6 hours and 59 minutes of service a day
	service a day		
3	7 or more hours of	3	\geq 7 hours to \leq 9 hours and 59 minutes of service a day
	service a day		

In order to bill for services for a given day, the individual must have received at least one full hour of service as described in his/her supports plan. For example:

- If the individual leaves ½ hour after arriving for any reason, no services can be billed.
- If the individual receives 1 hour and 30 minutes of service, the provider may bill for 1 block of service
- If the individual receives 5 hours and 45 minutes of service, the provider may bill for 2 blocks of service.
- If the individual receives 7 hours and 15 minutes of service, the provider may bill for 3 blocks of service.

The billing codes, modifiers, criteria, documentation requirements, prior-authorization process, and reimbursement have not changed.

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VIRGINIA MEDICAID WEB PORTAL

DMAS offers a web-based Internet option to access information regarding Medicaid or FAMIS member eligibility, claims status, check status, service limits, service authorizations, and electronic copies of remittance advices. Providers must register through the Virginia Medicaid Web Portal in order to access this information. The Virginia Medicaid Web Portal can be accessed by going to: www.virginiamedicaid.dmas.virginia.gov. If you have any questions regarding the Virginia Medicaid Web Portal, please contact the ACS Web Portal Support Helpdesk, toll free, at 1-866-352-0496 from 8:00 A.M. to 5:00 P.M. Monday through Friday, except holidays. The MediCall audio response system provides similar information and can be accessed by calling 1-800-884-9730 or 1-800-772-9996. Both options are available at no cost to the provider.

REQUESTS FOR DUPLICATE REMITTANCE ADVICES

In an effort to reduce operating expenditures, requests for duplicate provider remittance advices are no longer printed and mailed free of charge. Duplicate remittance advices are now processed and sent via secure email. A processing fee for generating duplicate paper remittance advices has been applied to paper requests, effective July 1, 2009.

ALTERNATE METHODS TO LOOK UP INFORMATION

As of August 1, 2009, DMAS enrolled providers now have the additional capability to look up service limits by entering a procedure code with or without a modifier. Any procedure code entered must be part of a current service limit edit to obtain any results. The service limit information returned pertains to all procedure codes used in that edit and will not be limited to the one procedure code that is entered. This is designed to enhance the current ability to request service limits by Service Type, e.g., substance abuse, home health, etc. Please refer to the appropriate Provider Manual for the specific service limit policies.

ELIGIBILITY VENDORS

DMAS has contracts with the following eligibility verification vendors offering internet real-time, batch and/or integrated platforms. Eligibility details such as eligibility status, third party liability, and service limits for many service types and procedures are available. Contact information for each of the vendors is listed below.

Passport Health	SIEMENS Medical Solutions –	Emdeon
Communications, Inc.	Health Services	www.emdeon.com
www.passporthealth.com	Foundation Enterprise Systems/HDX	Telephone:
sales@passporthealth.com	www.hdx.com	1 (877) 363-3666
Telephone:	Telephone:	
1 (888) 661-5657	1 (610) 219-2322	

"HELPLINE"

The "HELPLINE" is available to answer questions Monday through Friday from 8:30 a.m. to 4:30 p.m., except on state holidays. The "HELPLINE" numbers are:

1-804-786-6273 Richmond area and out-of-state long distance 1-800-552-8627 All other areas (in-state, toll-free long distance)

Please remember that the "HELPLINE" is for provider use only. Please have your Medicaid Provider Identification Number available when you call.